PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006.	OMB 0651-0032
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Index the Paperwork Soluction Act of 1995, no person are required to re Effective on 12/08/2004.  Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				respond to a collection of information unless it displays a valid OMB control number.  Complete if Known						
				Application Number 09		09/918,572-Cd	09/918,572-Conf. #3584			
FEE TRANSMITTAL					August 1, 2001					
							Michael Kriege	Michael Krieger		
	For FY	2006	<u> </u>		Examiner Name S		S. F. Husar	S. F. Husar		
X Applicant	t claims small entity	status. S	See 37 CFR 1.2	<b>!</b> 7	Art Unit 28			2875	2875	
TOTAL AMOU	NT OF PAYMEN	T e	(\$) 225.00		Atton	ney Docket	No.	32405-172174		_
METHOD OF	PAYMENT (ch	eck all th	nat apply)					······································		
Check Credit Card Money Order None Other (please identify):										
x Deposit Ac	count Deposit Acc	ount Numb	er: 22-0261	Deposit Acc	ount Nar	ne:		Venable LLI	<b>-</b>	
For the	above-identified	deposit a	ccount, the [	Director is	hereb	y authorize	ed to: (che	eck all that apply)		
x CI	narge fee(s) indic	ated bel	ow			Charge	e fee(s) ir	dicated below, ex	cept for 1	the filing fee
	narge any additio e(s) under 37 Cf			ment of	[	x Credit	any over	payments		
FEE CALCUL										
1. BASIC FILIN	G, SEARCH, AN	D EXAM	INATION FE	ES						
			G FEES	SEA		FEES	EXAMI	NATION FEES		
Application Ty	/pe Fe	e (\$)	Small Entity Fee (\$)	Fee (\$		nall Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees	Paid (\$)
Utility		300	150	500		250	200	100		
Design	2	200	100	100		50	130	65		
Plant	2	200	100	300		150	160	80		
Reissue	3	300	150	500		250	600	300		
Provisional	2	200	100	0		0	0	0		
2. EXCESS CLA	AIM FEES									Small Entity
Fee Description									Fee (\$)	Fee (\$)
	20 (including R								50	25
-	nt claim over 3 (	includin	g Reissues)						200	100
Multiple depend							_	• 141.1. B	360	180
Total Claims	Extra Clain		<u>ee (\$)</u>	Fee F	Paid (\$	<u>)                                    </u>	_	fultiple Depende		•
<del></del>	- 20 =	×	= -					<u>ee (\$)</u>	ee Paid (	<u>31</u>
Indep. Claims	Extra Clain	ns F	ee (\$) =	Fee F	Paid (\$	)				<del></del>
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
Total Sheet	s <u>Extra S</u>	heets	Number	of each a	ddition	al 50 or frac	tion there	of Fee (\$)	<u>Fee</u>	Paid (\$)
100 = /50 (round up to a whole number) x =										
4. OTHER FEE(S) Fees Paid (\$)										
Other (e.g., late filing surcharge): 2252 Extension for response within second month 225.00						25.00				
SUBMITTED BY			· ·	A						
Signature	MIL	W	rul			ration No. ey/Agent)	42,709	Telephone	(202) 34	44-4000
Name (Print/Type)	Jeffr A. Kami							Date	February	13, 2006

PTO/SB/22 (12-04)
Approved for use through 7/31/2006, OMB 0651-0031
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Under the approved a reduction Act of 1995, no persons are required							
PETITION FOR EXTENSION OF TIME UNDER 37	Docket Number (Optional)						
FY 2006	32405-172174						
(Fees pursuant to the Consolidated Appropriations Act, 2							
Application Number 09/918,572-Conf. #	3584	Filed A	ugust 1, 2001				
For PORTABLE LIGHT WITH STAND							
Art Unit 2875		Examiner	S. F. Husar				
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.							
The requested extension and fee are as follows (chec	k time period des	ired and enter the app	propriate fee below):				
	<u>Fee</u>	Small Entity Fee	•				
One month (37 CFR 1.17(a)(1))	\$120	\$60	\$				
X Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ 225.00				
Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$				
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$				
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$				
X   Applicant claims small entity status. See 37 CFR 1.27.     A check in the amount of the fee is enclosed.     Payment by credit card. Form PTO-2038 is attached.     X   The Director has already been authorized to charge fees in this application to a Deposit Account.     X   The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number   22-0261   I have enclosed a duplicate copy of this sheet.     I am the   applicant/inventor.     assignee of record of the entire interest. See 37 CFR 3.71.     Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).							
attorney or agent of record. Re							
x attorney or agent under 37 CFF		40 700					
Registration number if acting und	der 37 CFR 1.34	42,709	•				
I Mili Mindle		Februar	y 13, 2006				
Signature	Date						
Jeffri A. Kaminski		(202)	344-4000				
Typed or printed name	Telephone Number						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.							
Total of forms are submitted	ed.						

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